Ĺ	N .	The state of the s	
	ARIZONA STATE BOARD OF HEALTH		
î	I PLACE OF BIRTH BUREAU OF VI	ITAL STATISTICS State File No	
	CountyCounty	IFICATE OF BIRTH Registered No.	
		Biate armora	
	ν.	or Villago	
11	City Mami No. 34 Vine Oak Canons		
\parallel	2. Full name of child		
	3. Sex of Child	If child is not yet named, make	
	in event of plure!	6. Legitimate?	
╟	Jamuel births. 5. No., in order of birth.	40 7. Date of birth Mck. 30-1929.	
	8. PATHER	Slonth Day Year	
	Full name Manage Da	14. () MOTHER	
-	9. Residence	Full malden name Wodlota Olivo	
	(Usual place of abode) Mame,	15. Residence (Usual place of chode) Miama	
	If non-resident, give place and state.	(and a addle)	
	10. Color or race	If non-resident, give place and state. Wygona.	
	mer. 17	16. Color or race	
-	11. Age at last birthday (Years)	Mel. 17. Age at last birthday 25 (Years)	
1	12. Birthplace (city or place) Uguas Calibrato		
	(State or country)	18. Birthplace (city or place) Uguas Callentes	
1	13. Occupation Mill	(State or country)	
•	Nature of industry	19. Occupation	
	MA A CALLOR CL.	Nature of industry	
2	20. Number of children of this mother	Øtompenule	
• •	(Tolon as a first white and	now living 3 21. Were precautions taken against oph-	
C	(taken as of time of birth of child herein certified and including this child.) (b) Born alive but (c) Stillborn	now dead thalmia neonatorum?	
CERTIFICATE OF ATTEMDING PHYSICIAN OR MIDWIFE* 30			
,	The state of the birth of this child, who was 1/70 (AA) a 1/A, a		
	or midwife, then the father, householder. Signature	M. John Mall M 10	
	child to one at the country of stillborn	D. C.	
G	liven name added to	hypercian	
a	a supplemental report		
	Month, day, year	came, who have	
	Registrar Filed P	11,10 10.6. Jona	
		Registrar	
	399-330-411		

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